

## Troop Activity Planning Sheet

Event:			Date:			
Depart:		Return:		Cost:		
Name	(X)	Patrol	Perm. Slip	Attended	Amt. Paid	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						

Adult Leaders	<u>Passengers</u> TO	<u>Passengers</u> FROM	Insurance/Drivers License Information	Amt. Paid
Drivers	TO	FROM	Insurance/DL information	

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Expense Record

Expense	Check #/cash	Amount
Total		

Cost per person

Item	Quantity	Amount
Breakfast @ ____ ea.		
Lunch @ ____ ea.		
Supper @ ____ ea.		
Snacks @ ____ ea.		
Camp fee		
Total		

Planning Guide

Theme or Activity:				
Outing target group:				
Suggested location(s):				
Outing dates: from ____/____/____ to ____/____/____				
Reservations Made by:				
Special water/firewood/arrangements:				
Outing Program Planned by:				
Permission Slips Issued: ____ / ____ / ____ Forms due back by ____ / ____ / ____				
Tour Permit: Filed ____ / ____ / ____ by _____ Rcvd on ____ / ____ / ____				
Adult Buyer is:				
Patrol				
Plan Menus				
Duty Roster				
Buy Food				

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